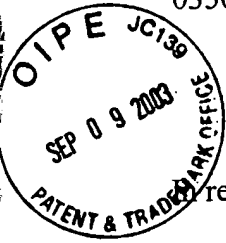


03500.014438

PATENT APPLICATION

SC  
#13C  
9-2303

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Re Application of:

MASATO OCHIAI ET AL.

Application No.: 09/552,589

Filed: April 19, 2000

For: DEVICE SEARCH SYSTEM

)  
:  
Examiner: M.G. Hamilton

)  
:  
TC/Art Unit: 2172

)  
:  
September 8, 2003

RECEIVED

SEP 11 2003

Technology Center 2100

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT AND PETITION FOR EXTENSION OF TIME

Sir:

Applicants petition to extend the time for response to the Office Action dated May 9, 2003, to and including September 9, 2003. A check in the amount of \$110.00 for payment of the extension fee is enclosed. Please charge any additional fee required for the extension, or credit any overpayment, to Deposit Account 06-1205.

The Examiner is respectfully requested to amend the above-identified application as follows:

09/10/2003 YPOLITE1 00000054 09552589

01 FC:1202	72.00 OP
02 FC:1201	336.00 OP

09/10/2003 YPOLITE1 00000054 09552589

03 FC:1251	110.00 OP
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2172  
\$

In re Application of:

Docket No. 03500.014438

MASATO OCHIAI ET AL.

Application No.: 09/552,589

Examiner: M.G. Hamilton

Filed: April 19, 2000

TC/Art Unit: 2172

For: DEVICE SEARCH SYSTEM

Date: September 8, 2002

COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

**RECEIVED**

SEP 11 2003

Technology Center 2100

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 54	MINUS	** 50	= 4	x \$9 \$18	\$72.00
INDEP. CLAIMS	* 16	MINUS	*** 12	= 4	x \$42 \$84	\$336.00
Fee for Multiple Dependent claims \$140°/\$280						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$408.00

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☒ A check in the amount of \$408.00 is enclosed.

☐ Charge \$ \_\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

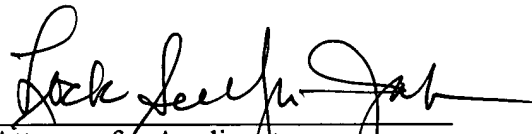
☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☒ A check in the amount of \$110.00 to cover the fee for a one-month extension is enclosed.

☐ A check in the amount of \$ \_\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
\_\_\_\_\_  
Attorney for Applicants  
Lock See Yu-Jah  
Registration No. 38,667

FITZPATRICK, CELLA, HARPER & SCINTO  
30 Rockefeller Plaza  
New York, New York 10112-3801  
Facsimile: (212) 218-2200

Form #120

NY\_MAIN 350185v1